

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS430AGC	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED C 08/19/2009
NAME OF PROVIDER OR SUPPLIER SUNSHINE CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 3970 MARYLAND AVE LAS VEGAS, NV 89121		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an investigation conducted at your facility on 8/19/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility was licensed for eight Residential Facility for Group beds for elderly and disabled person and/or persons with mental illness Category II residents. The census at the time of the survey was ten. Ten resident files were reviewed and five employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D. The following deficiencies were identified:	Y 000		
Y 070 SS=E	449.196(1)(f) Qualifications of Caregiver-8 hours training NAC 449.196 1. A caregiver of a residential facility must: (f) Receive annually not less than 8 hours of training related to providing for the needs of the residents of a residential facility. This Regulation is not met as evidenced by: Based on record review on 8/19/09, the facility failed to ensure that 2 of 5 employees received eight hours of (Employee #1 and #4). Employee	Y 070		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 070	Continued From page 1 #1 failed to have 8 hours of medication management training, and was administering medications. Employee #3 failed to have 8 hours of caregiver training annually. This was a repeat deficiency from the 8/12/08 State Licensure survey. Severity: 2 Scope: 2	Y 070			
Y 087 SS=I	449.199(3) Limitation on Number of Residents NAC 449.199 3. A residential facility must not accept residents in excess of the number of residents specified on the license issued to the owner of the facility. This Regulation is not met as evidenced by: Based on observation, record review and interview on 8/19/09, the facility was over census. Findings include: The facility has a license for eight (8) residents. The facility was maintaining active records for 10 residents and provided these records for review on 8/19/09. The facility was maintaining Medication Administration Records and the medications for 10 residents. On 8/19/09 at approximately 9:50 AM, Employee #4, the owner, stated he had 10 residents and he that he was over census. Severity: 3 Scope: 3	Y 087			

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Y 103 SS=F	<p>449.200(1)(d) Personnel File - NAC 441A</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/19/09, the facility failed to ensure 2 of 5 employees complied with NAC 441A.375 regarding tuberculosis testing (Employee #1, and #5) for the protection of all residents. Employee #1 and #5 failed to provide evidence of a two step TB test. Employee #5 failed to provide evidence of a pre-employment physical.</p> <p>This was a repeat deficiency from the 8/12/08 and 6/3/09 State Licensure surveys.</p> <p>Severity: 2 Scope: 3</p>	Y 103		
Y 105 SS=F	<p>449.200(1)(f) Personnel File - Background Check</p> <p>NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.</p> <p>This Regulation is not met as evidenced by:</p>	Y 105		

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Y 105	Continued From page 3 Based on record review on 8/19/09, the facility failed to ensure 5 of 5 employees met background check requirements (Employee #1, #2, #3, #4 and #5). Employee #1, #3 and #5 failed to provide evidence of a state and FBI background check. Employee #2 and #4 failed to have a background check every five years. Severity: 2 Scope: 3	Y 105		
Y 172 SS=C	449.209(2) Health and Sanitation-Outside garbage NAC 449.209 2. Containers used to store garbage outside of the facility must be kept reasonably clean and must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure 1 of 1 container used to store garbage outside the facility was covered. Severity: 1 Scope: 3	Y 172		
Y 274 SS=C	449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal.	Y 274		

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Y 274	Continued From page 4 This Regulation is not met as evidenced by: Based on observation and interview on 8/19/09, the facility failed to ensure menu substitutions were documented and retained for at least 90 days. The facility failed to follow the posted menu for 2 of 2 meals observed on 8/19/09, substitutions were not written on the posted menu. Severity: 1 Scope: 3	Y 274		
Y 320 SS=E	449.220(1) Bedroom Doors - Locks NAC 449.220 1. A bedroom door in a residential facility which is equipped with a lock must open with a single motion from the inside unless the lock provides security for the facility and can be operated without a key or any special knowledge. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure single motion locks were provided for 2 of 6 bedrooms (Bedroom #1 and #6). Severity: 2 Scope: 2	Y 320		
Y 356 SS=E	449.222(6) Bathrooms and Toilet Facilities NAC 449.222 6. Bathroom doors that are equipped with locks must open with a single motion from the inside	Y 356		

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Y 356	Continued From page 5 without the use of a key. If a key is required to open a lock from outside the bathroom, the key must be readily available at all times. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure 1 of 3 bathroom doors was equipped with a single motion lock (Bathroom inside of Bedroom #6). Severity: 2 Scope: 2	Y 356			
Y 450 SS=E	449.231(1) First Aid and CPR NAC 449.231 1. Within 30 days after an administrator or caregiver of a residential facility is employed at the facility, the administrator or caregiver must be trained in first aid and cardiopulmonary resuscitation. The advanced certificate in first aid and adult cardiopulmonary resuscitation issued by the American Red Cross or an equivalent certification will be accepted as proof of that training. This Regulation is not met as evidenced by: Based on record review on 8/19/09, the facility did not ensure that 2 of 5 employees received first aid and cardiopulmonary resuscitation (CPR) training within thirty days of employment (Employee #1 and #3).	Y 450			

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Y 450	Continued From page 6	Y 450		
Y 621 SS=E	<p>Severity: 2 Scope: 2</p> <p>449.2702(4)(b) Admission Policy</p> <p>NAC 449.2702</p> <p>4. Except as otherwise provided in NAC 449.275 and 449.2754, a residential facility shall not admit or allow to remain in the facility any person who:</p> <p>(b) Requires restraint.</p> <p>This Regulation is not met as evidenced by: NAC 449.2702</p> <p>6. As used in this section:</p> <p>(b) "Restraint" means:</p> <p>(1) A psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms;</p> <p>(2) A manual method for restricting a resident's freedom of movement or his normal access to his body; or</p> <p>(3) A device or material or equipment which is attached to or adjacent to a resident's body that cannot be removed easily by the resident and restricts the resident's freedom of movement or his normal access to his body.</p> <p>Based on observation, interview and record review on 8/19/09 , the facility failed to ensure 5 of 10 residents were not restrained with the use of full side bed rails.</p> <p>Severity: 2 Scope: 2</p>	Y 621		

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Y 859	Continued From page 7	Y 859			
Y 859 SS=F	<p>449.274(5) Periodic Physical examination of a resident</p> <p>NAC 449.274</p> <p>5. Before admission and each year after admission, or more frequently if there is a significant change in the physical condition of a resident, the facility shall obtain the results of a general physical examination of the resident by his physician. The resident must be cared for pursuant to any instructions provided by the resident's physician.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/19/09, the facility failed to ensure that 7 of 10 residents received an initial or annual physical (Resident #1, #3, #4, #6, #7, #8, and #9).</p> <p>Severity: 2 Scope: 3</p>	Y 859			
Y 878 SS=G	<p>449.2742(6)(a)(1) Medication / Change order</p> <p>NAC 449.2742</p> <p>6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident:</p> <p>(a) The caregiver responsible for assisting in the administration of the medication shall:</p> <p>(1) Comply with the order.</p>	Y 878			

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Y 878	<p>Continued From page 8</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 8/19/09, the facility failed to ensure that 2 of 10 residents received medications as prescribed (Resident #4 and #9).</p> <p>Findings Include:</p> <p>Resident #9: The resident was prescribed Amitriptyline 10 mg tablet by mouth every night. The surveyor found the prescription bottle was empty and the medication administration record (MAR) was not initialed since 8/14/09. The surveyor interviewed Resident #9 and he stated he missed the medication the previous two nights and had a nightmare. He said that he is bi-polar and without his anti-depressant medication he gets depressed and it manifests in the forms of nightmares. Resident #9 stated this particular nightmare was not too bad. The surveyor interviewed Employee #1 who confirmed Resident #9 missed two doses of the medication. A phone call to the pharmacy revealed the medication would be delivered the next day, 8/20/09.</p> <p>Resident #9 reported he also missed a medication at the beginning of the week. He said he felt extra anxious without this medication, but since receiving it he has been feeling better. The surveyor interviewed Employee #1 who stated Resident #9 was out of his Risperidone, 2 mg tablets on "Sunday 8/16/09 and Monday 8/17/09".</p> <p>Resident #4: The resident was prescribed</p>	Y 878			

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Y 878	Continued From page 9 Doc-Q-Lace to be given by mouth two times a day. The August 2009 MAR revealed the facility was only giving the medication to the resident one time a day. Severity: 3 Scope: 1	Y 878			
Y 885 SS=F	449.2742(9) Medication / Destruction NAC 449.2742 9. If the medication of a resident is discontinued, the expiration date of the medication of a resident has passed, or a resident who has been discharged from the facility does not claim the medication, an employee of a residential facility shall destroy the medication, by an acceptable method of destruction, in the presence of a witness and note the destruction of the medication in the record maintained pursuant to NAC 449.2744. Flushing contents of vials, bottles or other containers into a toilet shall be deemed to be an acceptable method of destruction of medication. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure medications belonging to 2 of 10 current residents and eight discharged residents were destroyed. Severity: 2 Scope: 3	Y 885			
Y 895 SS=C	449.2744(1)(b)(1) Medication / MAR	Y 895			

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Y 920	Continued From page 12 locked area separate from other medications. A resident who is capable of administering medication to himself without supervision may keep his medication in his room if the medication is kept in a locked container for which the facility has been provided a key. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure all prescription and over-the-counter medications were secured in a locked area. Unlocked medications were found in Bedroom #1, Bedroom #2, Bedroom #6, a filing cabinet in the kitchen, a desk in the kitchen, a filing cabinet in the family room, a desk in the family room. Medications found belonged to current and discharged residents. Severity: 2 Scope: 3	Y 920		
Y 921 SS=D	449.2748(2) Medication Storage NAC 449.2748 2. Medication stored in a refrigerator, including, without limitation, any over-the-counter medication, must be kept in a locked box unless the refrigerator is locked or is located in a locked room. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to ensure that refrigerated medications belonging to 1 of 10 residents were secured (Resident #5).	Y 921		

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Y 921	Continued From page 13 Severity: 2 Scope: 1	Y 921			
Y 923 SS=E	449.2748(3)(b) Medication Container NAC 449.2748 3. Medication, including, without limitation, any over-the-counter medication or dietary supplement, must be: (b) Kept in its original container until it is administered. This Regulation is not met as evidenced by: Based on observation on 8/19/09, the facility failed to keep medications belonging to 4 of 10 residents in their original container (Resident #2, #4, #5 and #6) Severity: 2 Scope: 2	Y 923			
Y 936 SS=F	449.2749(1)(e) Resident file NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to	Y 936			

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Y 936	<p>Continued From page 14</p> <p>the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 8/19/09, the facility failed to ensure 5 of 10 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #1, #2, #3, #6, and #8) which affected all residents.</p> <p>This was a repeat deficiency from the 8/12/08 State Licensure survey.</p> <p>Severity: 2 Scope: 3</p>	Y 936			

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